

Cochise County Jail Provider N Casa de Vida 5/19-

PATIENT: Kristina Hills

DATE OF BIRTH: 09/17/1976

DATE: 04/16/2019 HISTORIAN: Inmate

VISIT TYPE: Chronic complaint/ER visit follow-up

1/19 il addressed left inguinal pain/ lump-thorough bloodwork Diagnosed w Severe monaguelasse

HPI: I/P was sent to the ED for evaluation last night for complaints of the congular condition. I/P was diagnosed with lymphadenopathy and discharged. Chronic condition/complaint.

PAST MEDICAL/SURGICAL HISTORY: Hep C (per I/P, "took two Hep C shots"), TBI 2012, Osteomyelitis in spine, PID in November 2018(treated), RA

FAMILY HISTORY: Not on file

SOCIAL HISTORY: History of IVDU heroin, Marijuana. Positive for Tobacco. Denies ETOH

**CURRENT MEDICATIONS: none** 

ALLERGIES: NKMA

**REVIEW OF SYSTEMS:** 

System	Neg/Pos	Details
Constitutional	Negative	Fatigue, fever, night sweats
ENMT	Positive	nasal congestion
Eyes	Negative	Eye discharge, vision changes, vision loss
Respiratory	Negative	SOB, Cough
Cardio	Negative	Chest pain, claudication and irregular heartbeat/palp
GI	Negative	Bloating, Abdominal pain, Constipation, N/V/D
GU	Negative	Dysuria, Hematuria, Polyuria, penile or vaginal DC
Endocrine	Negative	Cold/Heat intolerance, polydipsia, polyphagia
Neuro	Negative	Gait disturbance
Psych	Negative	Anxiety and depression
Integumentary	Positive	lump left inguinal area
MSK	Positive	Bilateral ankle pain, chronic
Heme/lymph	Negative	Unusual bleeding or bruising
Allergic/Immuno	Negative	Environmental allergies or Food allergies

VITAL SIGNS- BP mm/Hg: Weight/BMI:

Temp/Pulse/Resp: SPO2: (See orders for VS)

FUNCTIONAL STATUS: Performs ADLs without assistance

## PHYSICAL EXAM:

Exam	Findings	<u>Details</u>
Constitutional	Normal	Well developed, well kempt
HEENT	Normal	Conjunctiva clear, PERRLA,
Respiratory	Normal	CTA Bilat, effort without difficulty
Cardiovascular	Normal	RRR, S1S2, No murmurs, rubs or gallops
Skin	Abnormal	Left inguinal node palpable, tender, moveable
MSK	Normal	Visual overview of all four extremities normal; left ankle larger than right
Neurological	Normal	Intact, short term memory issues, I/P states she forgets easily due to TBI
Psychiatric	Normal	A/O x 4, Appropriate mood/affect

## ASSESSMENT/PLAN:

1. <u>Assessment:</u> Patient comes to clinic because of the above-mentioned complaint and follow up from ER visit. Advised I/P of discharge diagnosis and likely reactive lymph node. I/P reassured and offered STD testing in which she declined. Also discussed chronic ankle pain and that moist heat would likely be more effective than ice due to chronic rather than acute pain.

<u>Impression:</u> Chronic localized lymphadenopathy

<u>Plan Orders:</u> Provide I/P with copies of requests she submits so that she can keep track of her requests due to short term memory loss.

2. Other:

MEDICATIONS (Added, Continued, or Stopped today):

Start Date Medication <u>Directions PRN status DC date</u>

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